

**CALIFORNIA WOMEN, INFANTS & CHILDREN (WIC) PROGRAM**  
**INSTRUCTIONS TO APPLY FOR AUTHORIZATION**  
**September 12, 2014**

**Informational Material:**

Review the following before completing the application package:

- [\*Instructions on Counting the Number of Registers in Your Store\*](#)
- [\*How to Verify a California Seller's Permit Number\*](#)
- [\*WIC Authorized Food List Shopping Guide\*](#)
- [\*Minimum Stocking Requirements\*](#)
- [\*What is an Acceptable Record of Inventory\*](#)
- [\*Preparing for an On-site Inspection\*](#)
- [\*WIC Program Policy Regarding Solicitation of WIC Participants\*](#)

**I. Application Process:**

Submission of an application package **does not guarantee** that an application will be approved. To be complete, an application package must contain **all** required documents, **all** required information, and the **signed application**. If an application is incomplete, you will be notified by email and United States Postal Services mail. If a vendor applicant does not meet authorization criteria, the application will be denied and you will be notified.

Follow the link below for a downloadable application:

[http://www.cdph.ca.gov/programs/wicworks/Documents/New\\_Vendor/Vendor\\_Application.pdf](http://www.cdph.ca.gov/programs/wicworks/Documents/New_Vendor/Vendor_Application.pdf)

1. Click on the link referenced above to open the application. Be sure you always use this link to access the most recent version of the application. Earlier versions of the application are not able to be processed **and will be rejected**.
2. Use "save as" to save a copy of the application to your computer desktop and rename the document with the street location of the store as the file name (e.g. 123 Main Street).
3. Complete the application; include all information and all documents required.
4. Print page 7 of the application and have it signed and dated by a person with authority to contract for business ownership.
5. E-mail the completed application file and all scanned documents to [WICVENDORINFO@cdph.ca.gov](mailto:WICVENDORINFO@cdph.ca.gov)
6. Follow this link to the [paper version of the application](#), mail the completed application, with an original signature and all required supporting documentation to the address shown at bottom of these instructions. **Please note:** submission of a paper application **may delay the review process**.
7. Only stores currently CalFresh authorized and with a valid health permit may be considered for authorization.

**CALIFORNIA WIC PROGRAM**  
**INSTRUCTIONS TO APPLY FOR AUTHORIZATION**  
(Continued)

**Vendor Training:** **You (or a representative) will be required to attend an interactive vendor training class** even if you (or a representative) recently attended a vendor training class, in order to authorize a new store. The State will designate the date, time, and location of the vendor training class. You will receive an e-mail confirming the date, time, and location of the vendor training class. *All vendor training classes are conducted in the English language.* Failure to attend and pass a written examination at the training may result in denial of the application.

**On-Site Inspections:** All store locations may be required to undergo an on-site inspection to verify the store complies with all WIC regulations. You will be notified by State staff of the date of the on-site inspection. If your store is not ready for the on-site inspection, you may request (in writing) to withdraw your application, otherwise the inspection will take place as scheduled. Requests to withdraw an application package may be mailed to the address at the bottom of **page 7** of this document. You may later reapply when the store is ready to meet all authorization criteria.

## **II. Application Package:**

All required forms are listed below. A **separate application** is required **for each store location**.

**ALL Vendor applicants** must submit:

1. A completed application for each store. (Be sure to complete all seven pages of the application.)
2. Scanned copy of **Application Certification** (Page 7 of application), with signature, title and date.
3. Scanned copy of **Current Health Permit**.
4. Scanned copy of **Parent Company Information**, if applicable.
5. Scanned copy of **additional Vendor Ownership Disclosure** information, if there are more than four individuals in the vendor ownership.
6. Scanned copies of appropriate **CA Sales and Use Tax Forms**.

**New Vendors** (all applicants not currently authorized with the WIC Program) must submit:

- A scanned copy of the **Vendor Agreement**, signed and dated.

**Current WIC Vendors** (applicant has an existing CA WIC Vendor Agreement with the identical vendor ownership) must submit:

- A scanned copy of the **Addendum**, signed and dated, and
- A scanned copy of the **Exhibit A** with names and addresses of all new stores.

**CALIFORNIA WIC PROGRAM**  
**INSTRUCTIONS TO APPLY FOR AUTHORIZATION**  
(Continued)

**III. Instructions to Complete the Application:**

**Page 1**

*Section 1: Vendor Store Information*

- **Select the vendor type:**
  - New WIC Contract: check here if you are applying and do not have an existing Vendor Agreement with identical ownership OR if you are applying for a store under a different vendor ownership than the one currently authorized (current WIC Vendor Agreement is with a sole ownership and you are applying as a partnership or LLC, etc.).
  - Existing WIC Contract: check here if you are applying to add a new store to an existing Vendor Agreement with the identical vendor ownership.
- Enter the **name** of the store; the **store telephone number**; **fax number**, an **e-mail address** and the **physical address** of store, including the **suite number** if applicable.
- Enter a **mailing address** (in addition to the physical store address), **ONLY** if you wish to receive postal delivery other than at your store. This is the address the WIC Program will send **all** correspondence.
- Enter the **date this vendor ownership** acquired this vendor store location.
- Enter the date this vendor store location opened or is scheduled to open under this vendor ownership.
- Enter your **Federal Tax/Employee Identification Number** (EIN).
- Enter the **Number of Registers** in your store. Refer to “Instructions on Counting the Number of Registers in Your Store” listed under Informational Materials. See the hyperlink to document at the top of page 1 under Information Materials.
- Enter your **valid California Seller’s Permit Number**. Refer to “How to Verify a California Seller’s Permit Number.” See the hyperlink to document at the top of page 1 under Information Materials.
- If the store location **will sell ONLY** WIC-authorized foods, check **Yes** in the box provided; otherwise check **No**.
- Enter the **most recent date** the store passed a City or County **health inspection**. You **must also submit** a scanned copy of the current, **valid** health permit (**or** a scanned copy of the health inspection report indicating that the new store is approved to open and operate).

*Section 2: CalFresh Program Authorization Information*

- Enter the **SNAP/CalFresh Program Number** and all other applicable information. Only stores currently CalFresh authorized and with a valid health permit may be considered for authorization.

**CALIFORNIA WIC PROGRAM**  
**INSTRUCTIONS TO APPLY FOR AUTHORIZATION**  
(Continued)

**Page 2**

*Section 3: Vendor Ownership Type*

- Check the appropriate box for the **vendor ownership type** for this store.

*Section 4: Vendor Ownership Information*

- Enter all **vendor ownership** information. Enter the Contract ID Number (if known.)

*Section 5: If a Limited Liability Company or Corporation, etc.*

- Enter **parent company** information for a Limited Liability Company or Corporation, if applicable. Otherwise, leave blank.

**Page 3**

*Section 6: Vendor Ownership Disclosure*

- Enter **all** information for **each individual** associated with this vendor ownership **including** store managers, partners, corporate officers, LLC members, LLC managers and corporate directors. Attach additional separate sheets if necessary.

**Page 4**

*At top of page 4:*

- You **must disclose** if any individuals in this **vendor ownership or management including store managers, partners, corporate officers, LLC members, LLC managers or directors**, have been convicted of a crime, or had a civil judgment entered against them for the reasons indicated on the application. If applicable, you must enter the name(s) of the individuals and dates of legal actions, and provide a description of the conviction or judgment.

*Section 7: Business Days and Hours of Operation*

- Enter the **store hours of operation** for each business day and identify the holidays for which the store will be closed (if applicable). If the store is closed on a day, for example on Sundays, do not select anything for that day

*Section 8: Sales Information*

- You **must** provide the sales information for **this store location**.

**CALIFORNIA WIC PROGRAM**  
**INSTRUCTIONS TO APPLY FOR AUTHORIZATION**  
(Continued)

- If this vendor ownership has **owned the store for one year or more**, you **must** provide scanned copies of the requested ***California Sales and Use Tax Forms***.
- If this vendor ownership has **owned the store for less the one year**, you must provide an estimate of your annual food sales and scanned copies of the ***California Sales and Use Tax Forms***, if available.

**Page 5**

*Section 9: Infant Formula Supplier Form* (**Note:** This is now required of all applicants)

- Include all suppliers from whom you purchase infant formula and attach additional pages if necessary.
- For each supplier, indicate on the form if they are a manufacturer, distributor, wholesaler or retailer.
- Enter the name of the supplier.
- Enter the suppliers **valid** CA Seller's Permit Number and the seller's telephone number.
- **Note:** For **out-of-state** infant formula suppliers: if the supplier is an FDA approved manufacturer, no additional documentation is required. If not an approved FDA manufacturer, you must obtain documentation from the other State's WIC Program, verifying the supplier is an authorized infant formula supplier.
- Submit a scanned copy of the documentation, if applicable, with the application package.

**Page 6**

*Section 10: Competitive Price Criteria*

- Complete the Competitive Price Criteria. Provide current shelf prices for the WIC-authorized food produces.
- For each food product, indicate the lowest and highest shelf prices.
- If you only stock one type of a food product (such as one size and type of cheese) list the same price for the low and high prices.
- If you charge the same price for multiple types of the same food item list the same price for both the low and high prices.
- For more information, see Frequently Asked Questions at the following link:

<http://www.cdph.ca.gov/programs/wicworks/Documents/Shelf%20Price%20Survey%20FAQs%20FINAL%20010214.pdf>

**CALIFORNIA WIC PROGRAM**  
**INSTRUCTIONS TO APPLY FOR AUTHORIZATION**  
(Continued)

**Page 7**

*Section 11: Certification*

- Read all information contained in Section 11.
- Fill in your name, your title, the date, and verify the store address. If the address needs to be corrected for this section, **return to page 1, section 1** of the application and correct the store address. (If you are submitting a paper application, correct this part manually.)
- Print the page, sign the paper version, scan it, and attach it to the e-mail you send with the application.

**IV. Vendor Agreement (New vendors only):**

- Download and print a **copy of the Vendor Agreement**.
- Leave the Contract ID Number and Vendor Number on page one blank.
- Complete the information on Page 1 of the **Vendor Agreement**.
- Review all requirements contained in the **Vendor Agreement**.
- Enter the date and sign the last page of the **Vendor Agreement** according to the type of ownership:
  - Sole Proprietorship – signature of sole owner
  - Partnership/Limited Partnership – ALL partners' signatures
  - Limited Liability Company – two members' or managers' signatures
  - Corporation – two corporate officers' signatures.

***Note: if LLC has only one member and/or manager, only the signature of that individual is required. If Corporation has only one officer, only the signature of that individual is required.***
- Return a scanned and signed copy of the **Vendor Agreement**. A copy will be returned to you if the store is approved for authorization.

**V. Addendum and Exhibit A (currently authorized vendors only):**

- Download and print a **copy of the Addendum**.
- Enter the Contract ID Number, if known.
- Review all requirements contained on the **Addendum**.
- Enter the date and sign the **Addendum** according to the type of ownership:
  - Sole Proprietorship – signature of sole owner
  - Partnership/Limited Partnership – ALL partners' signatures
  - Limited Liability Company – two members' or managers' signatures
  - Corporation – two corporate officers' signatures.

***Note: if LLC has only one member and/or manager, only the signature of that individual is required. If Corporation has only one officer, only the signature of that individual is required.***

**CALIFORNIA WIC PROGRAM**  
**INSTRUCTIONS TO APPLY FOR AUTHORIZATION**  
(Continued)

- Download and print a copy of the **Exhibit A**
- Enter the name and mailing address of the ownership
- If you are applying for multiple store locations, you may include all the names and physical addresses of the store(s) applying to be authorized on the same **Exhibit A**
- Attach the **Exhibit A** to the **Addendum** and return a scanned and signed copy with the application. A copy of the **updated Addendum and Exhibit A** will be returned to you if the application is approved for authorization.

**VI. Application Package Submission:**

All vendor applicants: please e-mail the application and supporting materials as attachments to: [WICVENDORINFO@cdph.ca.gov](mailto:WICVENDORINFO@cdph.ca.gov) and include the **store address** in the subject line of the e-mail. (For example: 123 Main Street)

**To submit the package electronically, complete the following steps:**

1. Complete the application in the Portable Document Format (PDF).
2. Save this PDF application electronically with the street address as the name of the document. (For example: 123 Main Street)
3. Print the signature certification page (Page 7).
4. Sign the signature certification page
5. Scan the signature certification page
6. Attach the saved PDF application form and the signed, scanned version of the signature page 7 to an e-mail.
7. **New Vendors**, complete, sign, scan and attach the signed Vendor Agreement to the same e-mail.
8. **Currently Authorized Vendors**, complete, sign and scan the Addendum and Exhibit A to the same e-mail.
9. Scan and attach all other attachments to the same e-mail.
10. Submit the entire application package electronically to [WICVendorInfo@cdph.ca.gov](mailto:WICVendorInfo@cdph.ca.gov)
11. Make a copy of the entire application package for your records.

**To submit a hard-copy application package, please mail the materials to the following address:**

California WIC Program  
3901 Lennane Drive  
Sacramento, CA 95834  
ATTN: Vendor Applications

**Note: The WIC Program does not provide technical assistance or advice on how to establish or run a business.**

WIC Vendor information is also available at [www.wicworks.ca.gov](http://www.wicworks.ca.gov)  
For more information, call **1-855-WIC-STOR (1-855-942-7867)**